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Office Use Only



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SECRETARY OF STATE AND LANGE

COVER LETTER

то:	Registration S Division of Co			
SUBJE	`CT·	FENCOR,	LLC	
3000			ed Liability Company	
The end	closed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
		Penny K. Eyer		
			Name of Person	
		Jeffrey_CSw	reet, Esquire Firm/Company	
		595 W. Granad	la Blvd., Suite A Address	
		Ormond Beach.	FL 32174 City/State and Zip Code	·
		jcspenny@bell E-mail address: (t	.south.net o be used for future annual report notifica	tion)
For fur	ther information	concerning this matter, please co	all:	
Penny K. Every Name of Person			at (386) 677-3431 Area Code & Daytime Telephone Number	
Enclose	ed is a check for	the following amount:		
<u>X</u> \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FENCOR, LLC						
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appea orida Limited Liability Company)	ars on our records.				
(***)	onida Billionini, Company)					
The Articles of Organization for this Limited Liabi	ility Company were filed on	8/14/2002	and assigned			
Florida document number L02000010710						
· · · · · · · · · · · · · · · · · · ·	 "					
The arrandomination when itself to a ground the fallowing						
This amendment is submitted to amend the following	ing:					
A. If amending name, enter the new name of th	e limited liability company he	<u>:re</u> :				
The new name must be distinguishable and end with the	ne words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviatio			
"L.L.C."						
Enter new principal offices address, if applicable	e:					
(Principal office address MUST BE A STREET A	(DDRESS)					
						
T 4 11 11 11 11 11 11 11 11 11 11 11 11 1						
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>					
		····	<u> </u>			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on	our records, enter the	ae name of the nev			
registered office	address here.	•	-			
AN	Laverne B. Fish		ASS 11			
Name of New Registered Agent:	Laverne B. Fish	er				
New Registered Office Address:	21660 Overseas	Highway	N 2			
Enter Florida street address						
	Cudjoe Key	, Florida <u>330</u>	70 3			
-	Ciŋ	, Florida	Zab Code			
New Registered Agent's Signature, if changing Regi	stered Agent:					

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby entire that the limited liability company has been notified in writing of this change.

Hehanging Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Joseph V. Fisher	1200 Ocean Drive	Add
		Summerland Key, FI. 33042	Remove
MGR	Laverne B. Fisher	21660 Overseas Highway Cudjoe Key, FL 33042	XX Add Remove
MGR	Renee Versaw	204 Lakeview Court Mars, PA 16046	XXI*Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chan	age(s) here: (Attach additional sheets, if necessary.,)
_			<u> </u>
Dated	June /7 , 20		
	Signature of a member	er of authorized representative of a member	
		B. Fisher d or printed name of signee	

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Filing Fee: \$25.00